

**CONFIRMED POSITIVE HBsAg AND HCV TEST RESULTS REPORT
(BLOOD DONORS ONLY)**

INSTRUCTIONS:

N.J.A.C. 8:8-5.2 of the New Jersey Administrative Code requires licensed blood banks to report all prospective donors found to test positive for Hepatitis B Surface Antigen and Hepatitis C. All HBsAg and HCV positive donors must be reported to the New Jersey Department of Health and Senior Services on this form by the collecting blood bank. The blood bank is required to perform or have performed both a screening test and a second confirmatory test. Positive donors are defined as those donors having both a positive screening test and a positive confirmatory test. All information must be reported as requested.

Name of Donor (Last, First, Middle)	Birthdate	Sex	Race
Street Address	City	State	Zip Code
Telephone Number	Social Security Number or ID Number		
Original Donor Unit No.	Date Collected		
Drawn At (Name of Blood Bank)		Blood Bank Code Number	
Address of Blood Bank			
Specimen Submitted to State Laboratory? <input type="checkbox"/> Yes ** <input type="checkbox"/> No			

HBsAg	
Blood Bank and/or Reference Lab Test Results	
Screening Test	
Date of Test	
Result	
Confirmatory Test	
Date of Test	
Result	

HCV	
Blood Bank and/or Reference Lab Test Results	
Screening Test	
Date of Test	
Result	
Confirmatory Test	
Date of Test	
Result	

STATE USE ONLY State Lab's Test and Result **	
Test	EIA/Confirmatory
Result	
Date	